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						(Depositor's name)	
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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	I.	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/769,786 ITLE OF INVENTION:	02/03/2004		Hak-Ki Choi		61610105US	9242	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE I	FEE TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1440	\$300	\$0	\$1740	04/28/2008	
EXAMINER		ART UNIT	CLASS-SUBCLASS				
Change of correspondence address or indication of "Fee Address" (37 FR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON "			(1) the names of up to or agents OR, alternativ (2) the name of a single registered attorney or a 2 registered patent attor listed, no name will be	single firm (having as a member a by or agent) and the names of up to attorneys or agents. If no name is will be printed.			
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